

**READ INSTRUCTIONS ON BACK OF LAST PAGE BEFORE COMPLETING****TRANSCRIPT ORDER**District Court  
Northern District of Texas - Fort Worth DivisionDistrict Court Docket Number  
4:14-CR-00074-YShort Case Title USA v. Jonathan KutejCourt Reporter Ana WarrenDate Notice of Appeal Filed by Clerk of District Court Jun 26, 2015Court of Appeals # 15-10611


(If Available)

PART I. (To be completed by party ordering transcript. Do not complete this form unless financial arrangements have been made.)

A. Complete one of the following:

- ☐ No hearings  
☐ Transcript is unnecessary for appeal purposes  
☐ Transcript is already on file in Clerk's office  
☒ This is to order a transcript of the following proceedings: (check appropriate box)

Voir dire ☒; Opening statement of plaintiff ☒; defendant ☒;  
 Closing argument of plaintiff ☒; defendant ☒; Opinion of court ☒;  
 Jury instructions ☒; Sentencing ☐; Bail hearing ☐;

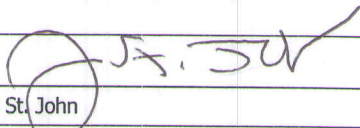
HEARING DATE(S)PROCEEDINGJUDGE/MAGISTRATEAugust 27, 2014ArraignmentJeffrey L. CuretonNovember 13, 2014Defendant's Motion to Represent HimselfTerry R. MeansNovember 18, 19, 20 of 2014Jury TrialTerry R. Means 

**FAILURE TO SPECIFY IN ADEQUATE DETAIL THOSE PROCEEDINGS TO BE TRANSCRIBED, OR FAILURE TO MAKE PROMPT SATISFACTORY FINANCIAL ARRANGEMENTS FOR TRANSCRIPT, ARE GROUNDS FOR DISMISSAL OF THE APPEAL.**

B. This is to certify that satisfactory financial arrangements have been completed with the court reporter for payment of the cost of the transcript. The method of payment will be:

- ☐ Private funds; ☒ Criminal Justice Act Funds (Attach copy of CJA Form 24 to court reporter's copy);  
☐ Other IFP Funds; ☐ Advance Payment waived by reporter; ☐ U.S. Government Funds;  
☐ Other

Signature

Date Transcript Ordered Jul 10, 2015

Print Name

J. Warren St. JohnCounsel for Jonathan Kutej

Address

801 Cherry Street, Unit No. 5, Fort Worth, Texas 76102

Phone Number

+1 (817) 336-1436

**ALLOWANCE BY THE COURT FOR LEAVE TO PROCEED IN FORMA PAUPERIS IN A CIVIL APPEAL DOES NOT ENTITLE THE LITIGANT TO HAVE TRANSCRIPT AT GOVERNMENT EXPENSE.**

PART II. COURT REPORTER ACKNOWLEDGEMENT (To be completed by the Court Reporter and forwarded to the Court of Appeals within 7 days after receipt. Read instruction on reverse side of copy 4 before completing.)

Date transcript order received	If arrangements are not yet made, date contact made with ordering party re: financial arrangements	Estimated completion date *	Estimated number of pages

- ☐ Satisfactory Arrangements for payment were made on \_\_\_\_\_  
☐ Arrangements for payment have not been made. Reason: ☐ Deposit not received ☐ Unable to contact ordering party ☐ Other (Specify) \_\_\_\_\_

Date

Signature of Court Reporter

Telephone

Address of Court Reporter: \_\_\_\_\_

**\* Do not include an estimated completion date unless satisfactory financial arrangements have been made or waived.**

PART III. NOTIFICATION THAT TRANSCRIPT HAS BEEN FILED IN THE DISTRICT COURT (To completed by court reporter on date of filing transcript in District Court and notification must be forwarded to Court of Appeals on the same date.)

This is to certify that the transcript has been completed and filed with the District Court today.

Actual Number of Pages

Actual Number of Volumes

Date

Signature of Court Reporter



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 Jury instructions ☐; Sentencing ☒; Bail hearing ☐;

HEARING DATE(S)PROCEEDINGJUDGE/MAGISTRATEJune 25, 2015SentencingTerry R. Means

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Address

J. Warren St. John801 Cherry Street, Unit No. 5, Fort Worth, Texas 76102Date Transcript Ordered Jul 10, 2015Counsel for Jonathan KutejPhone Number +1 (817) 336-1436

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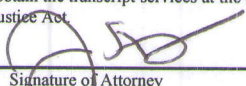
Actual Number of Volumes

Date

Signature of Court Reporter



## CJA 24 AUTHORIZATION AND VOUCHER FOR PAYMENT OF TRANSCRIPT (Rev. 01/08)

1. CIR./DIST./ DIV. CODE		2. PERSON REPRESENTED <b>Jonathan Kutej</b>		VOUCHER NUMBER			
3. MAG. DKT./DEF. NUMBER <b>01</b>		4. DIST. DKT./DEF. NUMBER <b>4:14-CR-00074/01</b>		5. APPEALS DKT./DEF. NUMBER <b>15-10611</b>		6. OTHER DKT. NUMBER	
7. IN CASE/MATTER OF (Case Name) <b>USA v. Kutej</b>		8. PAYMENT CATEGORY <input type="checkbox"/> Felony <input type="checkbox"/> Petty Offense <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Other <input checked="" type="checkbox"/> Appeal		9. TYPE PERSON REPRESENTED <input type="checkbox"/> Adult Defendant <input checked="" type="checkbox"/> Appellant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Appellee <input type="checkbox"/> Other		10. REPRESENTATION TYPE (See Instructions) <b>CC</b>	
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense.</i> <b>18 USC 2251(a); Production of Child Pornography &amp; 18 USC 2251(a) &amp; 2251 (e); Prod/Attempted Prod of Child Por.</b>							
<b>REQUEST AND AUTHORIZATION FOR TRANSCRIPT</b>							
12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED (Describe briefly) <b>Direct Appeal</b>							
13. PROCEEDING TO BE TRANSCRIBED (Describe specifically). NOTE: The trial transcripts are not to include prosecution opening statement, defense opening statement, prosecution argument, defense argument, prosecution rebuttal, voir dire or jury instructions, unless specifically authorized by the Court (see Item 14). <b>Arraignment, Defendant's Motion to Represent Himself, Jury Trial - Voir Dire, opening and closing statements of Plaintiff and Defendant, and Sentencing.</b>							
14. SPECIAL AUTHORIZATIONS							JUDGE'S INITIALS
A. Apportioned Cost _____ % of transcript with (Give case name and defendant)							
B. <input type="checkbox"/> 14-Day <input type="checkbox"/> Expedited <input type="checkbox"/> Daily <input type="checkbox"/> Hourly <input type="checkbox"/> Realtime Unedited							
C. <input type="checkbox"/> Prosecution Opening Statement <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Voir Dire <input type="checkbox"/> Jury Instructions							
D. In this multi-defendant case, commercial duplication of transcripts will impede the delivery of accelerated transcript services to persons proceeding under the Criminal Justice Act.							
15. ATTORNEY'S STATEMENT  As the attorney for the person represented who is managed above, I hereby affirm that the transcript requested is necessary for adequate representation. I, therefore, request authorization to obtain the transcript services at the expense of the United States pursuant to the Criminal Justice Act.  <div style="display: flex; justify-content: space-between;"> <div>             Signature of Attorney  <b>J. Warren St. John</b>            Printed Name         </div> <div> <b>07/10/2015</b>            Date         </div> </div> Telephone Number: <b>(817) 336-1436</b> <input checked="" type="checkbox"/> Panel Attorney <input type="checkbox"/> Retained Attorney <input type="checkbox"/> Pro-Se <input type="checkbox"/> Legal Organization				16. COURT ORDER  Financial eligibility of the person represented having been established to the Court's satisfaction the authorization requested in Item 15 is hereby granted.  <div style="display: flex; justify-content: space-between;"> <div>           _____            Signature of Presiding Judge or By Order of the Court             _____            Date of Order         </div> <div>           _____            Nunc Pro Tunc Date         </div> </div>			
<b>CLAIM FOR SERVICES</b>							
17. COURT REPORTER/TRANSCRIBER STATUS  <input type="checkbox"/> Official <input type="checkbox"/> Contract <input type="checkbox"/> Transcriber <input type="checkbox"/> Other				18. PAYEE'S NAME AND MAILING ADDRESS   Telephone Number: _____			
19. SOCIAL SECURITY NUMBER OR EMPLOYER ID NUMBER OF PAYEE   							
20.	TRANSCRIPT	INCLUDE PAGE NUMBERS	NO. OF PAGES	RATE PER PAGE	SUB-TOTAL	LESS AMOUNT APPORTIONED	TOTAL
	Original						
	Copy						
	Expense (Itemize)						
<b>TOTAL AMOUNT CLAIMED:</b>							
21. CLAIMANT'S CERTIFICATION OF SERVICE PROVIDED I hereby certify that the above claim is for services rendered and is correct, and that I have not sought or received payment (compensation or anything of value) from any other source for these services.  Signature of Claimant/Payee _____ Date _____							
<b>ATTORNEY CERTIFICATION</b>							
22. CERTIFICATION OF ATTORNEY OR CLERK I hereby certify that the services were rendered and that the transcript was received.  _____ Signature of Attorney or Clerk      Date							
<b>APPROVED FOR PAYMENT — COURT USE ONLY</b>							
23. APPROVED FOR PAYMENT  _____ Signature of Judge or Clerk of Court      Date						24. AMOUNT APPROVED	